

ECS Configuration Change Request

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CCR No. 96-0787	Logged Date 7/16/96	Rev.	Request Type CCR
Priority Routine <input type="checkbox"/> Urgent <input checked="" type="checkbox"/> Emergency <input type="checkbox"/>	Affected Release All	Change Class II	
Title (description) Computer Resources Required for M&O Development of Operational Procedures and Training			
Documents Affected		Source Nos (RID, NCR, Action Item, GSFC CCR, etc.) or Tech Reference	
RTM Change <input type="checkbox"/> Start New Baseline <input type="checkbox"/>			
Problem The ECS operations and training development personnel require ongoing access to ECS Release A baselined COTS hardware and software and custom-developed software applications for familiarization with these products and applications as a basis for development of operational procedures documentation (611-CD-xxx-xxx) and training (625-CD-xxx-xxx), for testing of developed hands-on practical exercises that will be part of the training, and for training rehearsal.			
Proposed Solution Provide dedicated access, 7:00 a.m. to 4:00 p.m. weekdays, to two X-terminal workstations, with connectivity to the ECS software environment, for the procedures and training development team. Requirement can be satisfied by connectivity to Goddard DAAC ECS software environment (preferable) or to the EDF mini-DAAC software environment. Procedures developers and training developers/instructors require this access as soon as possible, but not later than mid-August 1996. Full utilization of the workstations is anticipated during initial availability through September. After September, the work-stations will continue to be used for ongoing refinement of the procedures and training, and as a resource for classroom demonstrations and hands-on practical exercises			
Impact Analysis: Organizations Affected: BOO <input type="checkbox"/> Contracts <input type="checkbox"/> ESO <input type="checkbox"/> FOS <input type="checkbox"/> M&O <input checked="" type="checkbox"/> QA <input type="checkbox"/> Rel. A <input type="checkbox"/> Rel. B <input type="checkbox"/> Rel. IR1 <input type="checkbox"/> MRS <input type="checkbox"/> SMO <input type="checkbox"/> Subconts <input type="checkbox"/> A.1 <input type="checkbox"/> Other _____ Cost: None <input checked="" type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> (Not exceeding \$100,000) (\$100,000 to \$500,000) (Over \$500,000) Schedule: None <input type="checkbox"/> Other _____ Additional LOC _____ Man-Months _____ Materials _____			
Originator <u>Robert Hoffman</u>		7/15/96	
Signature		Date	
Office <u>M & O</u> Office Manager _____		7/15/96	
Signature		Date	
Disposition Approved <input type="checkbox"/> Approved w/Comment <input type="checkbox"/> Forward <input type="checkbox"/> Disapproved <input type="checkbox"/> Comments: CCB Chairperson _____ Signature Date			